

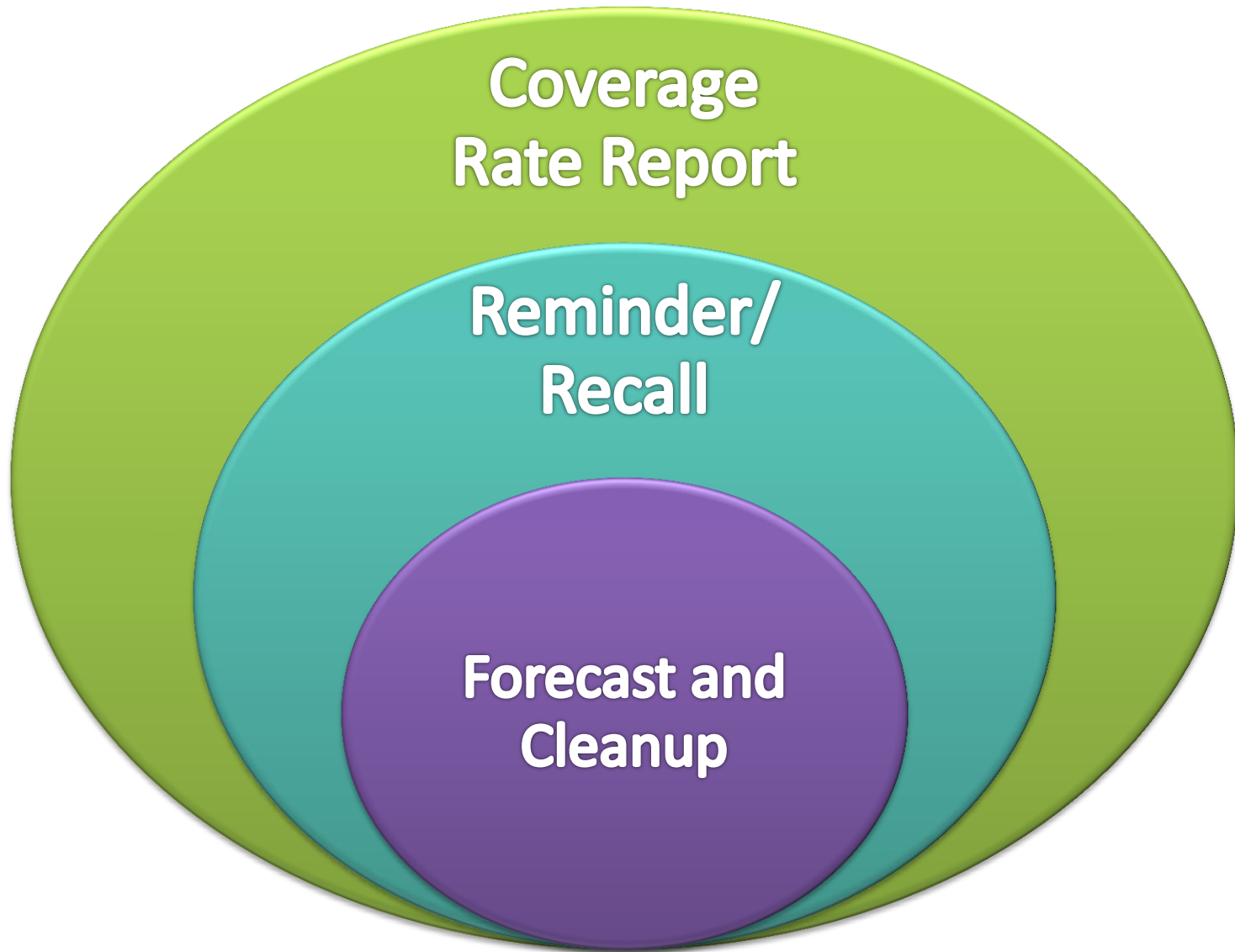
# 22<sup>nd</sup> Annual Arizona Immunization Conference



Improving Your Daily Life with ASIIS

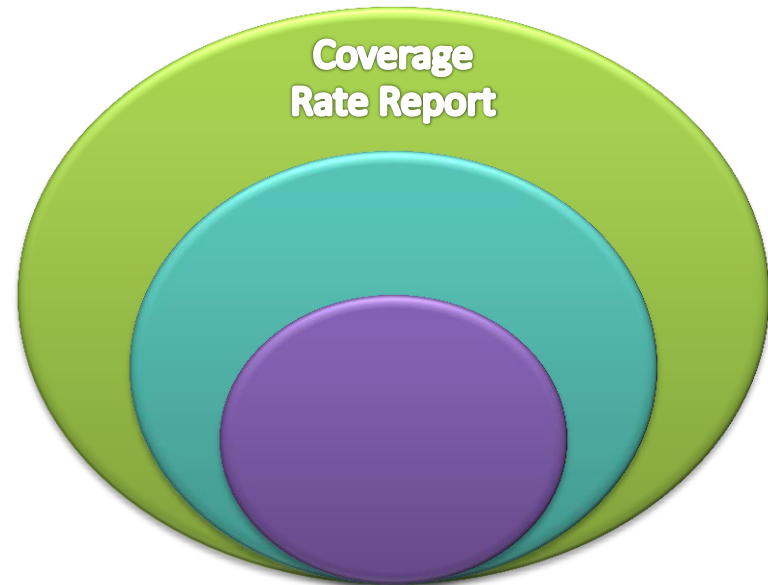
- Improving Patient Care and Coverage
- Searching and Adding Vaccines
- Improving Records
- Inventory Management
- Cold Storage Module

# The Big to the Small



Gives percentages of your patient population who are up to date and complete for the selected vaccines based on:

- Vaccines or Series
- Age Range
- Valid /All Vaccinations
- Additional Columns
  - » Complete by Vaccine
  - » Incomplete Series
  - » One dose to complete
  - » One visit to complete



# Coverage Rate Report



Arizona Department of Health Services

Logged in: RC RC

**Reports**

Vaccinations	Patients
Vaccination Totals	Daily Patient
Vaccinations Breakdown	Patient Data
Lot Number Summary	Patient Totals
Lot Usage and Recall Report	Recall for Incomplete
Vaccine Deferrals	Clinical Notes
Vaccine Lots to Expire	Contraindications
Daily Inventory Report	Aggregate Data
Reminder/Recall Success	Site Information
<b>Vaccines for Children</b>	Provider Coverage
VFC Vaccinations Breakdown	Physician/Volunteer
Vaccine Administered	
VFC Accountability Log	
VFC Profile Report	
<b>Registry</b>	<b>Quality</b>
Provider Submission Detail	Patient Data
Provider Submission	Vaccination Data
Registry Statistics	Vaccination Data
<b>Coverage Rate Report</b>	HL7 Certification
	Administrative
	Pre and Post

**Settings**

- CASA Export
- Reminder/Recall
- Imports
- Exports
- Scheduled Reports
- Job Queue
- Change Password
- Administration
- Campaigns

**Coverage Rate Report**

**Run By**

☒ By Ownership  
☐ By Service

**Specify Age Range**

**Series** 4313314 [Series Description](#)

☒ **Age Range**

From: 24 Months  
Through: 35 Months

Age as of Date (Today's date if left blank)

Evaluate At Age Months

**Limit Report By**

Patient Status ☒ Active Only ☐ Inactive Only ☐ All

Vaccine Status ☐ All Vaccinations ☒ Valid Vaccinations Only

Patient Race Black or African American  
White  
Native Hawaiian or Other Pacific  
American Indian or Alaska Native

Gender --select--

District/Region --select--

Patient County --select--

ZIP Code

☐ Organization (IRMS)  
☐ Organization (IRMS) Group  
☒ Do Not Limit

☐ Facility  
☒ Do Not Limit

☐ VFC PIN

☐ Exclude patients who have aged out (only Patient List)

**View By**

☐ District/Region  
☐ County/Parish  
☐ ZIP Code  
☐ Organization (IRMS)  
☐ Organization (IRMS) Group  
☐ Facility  
☐ VFC PIN  
☒ Aggregate (Total Only)

**Display Report Columns**

☒ Complete By Vaccine  
☒ Incomplete Series  
☒ One Dose to Complete Series  
☒ One Visit to Complete Series (Multiple doses needed but could be given with one visit to vaccinator)  
☐ Up-to-date  
☐ Late up-to-date  
☐ Missed Opportunities

Back Reset Export Patient List **Create Patient List** Export Coverage Report **Create Coverage Report**

# Coverage Rate Report



Completion By Vaccine								
Aggregate (Total Only)	Total Patients	TDAP ( ≥1 )	MENINGOCOCCAL ( ≥1 )	HPV ( ≥3 )	Incomplete Series	One Dose to Complete Series	One Visit to Complete Series	Series Complete
TOTAL	101	89 (88%)	92 (91%)	41 (41%)	61 (60%)	18 (18%)	15 (15%)	40 (40%)

# Reminder/Recall



Reports > Use Templates > See Patient Groups >

## Reminder/Recall

1 2 3

How do you want to run this Reminder/Recall?

- ☒ For all patients you own
- ☐ For all patients you have seen at your facility
- ☐ Include Inactive Patients (Excluding deceased)

Due Date Timeframe:

1

Who do you want to Contact?

Patient Location:

☒ Patient Age Range

☐ Patient Birth Date

Patient Gender

Exclude patients who were sent a notification in the last:  ☐ Days ☐ Weeks ☐ Months ☐ Years

Advanced

Which vaccines would you like to include?

4313314	
<input type="checkbox"/> DTaP/DT/Td	<input type="checkbox"/>
<input type="checkbox"/> HIB	<input type="checkbox"/>
<input type="checkbox"/> POLIO	<input type="checkbox"/>
<input type="checkbox"/> HEP-B 3 DOSE	<input type="checkbox"/>
<input type="checkbox"/> MMR	<input type="checkbox"/>
<input type="checkbox"/> VARICELLA	<input type="checkbox"/>
<input type="checkbox"/> PNEUMO (PCV)	<input type="checkbox"/>

I only want to see my patients who are:

- ☒ Due for all selected vaccines
- ☒ One dose away
- ☒ One visit to complete the series

Clear

## Reminder/Recall

1 2 3

What patients do you want to add to your recall group?

Remove Patients who don't have an available

☐ Name ☐ Phone ☐ Address ☐ Email

Remove Patients who have received more than  notifications.

	Last	First	Age	Available Contact Methods	R/R Attempts	Reason for Inactivation
<input checked="" type="checkbox"/>	Test	DESTINY	19	<input checked="" type="checkbox"/> Home <input checked="" type="checkbox"/> Phone <input checked="" type="checkbox"/> Email <input checked="" type="checkbox"/> Address	0	Select
<input checked="" type="checkbox"/>	Test	ALEXANDER	20	<input checked="" type="checkbox"/> Home <input checked="" type="checkbox"/> Phone <input checked="" type="checkbox"/> Email <input checked="" type="checkbox"/> Address	0	Select
<input checked="" type="checkbox"/>	Test	MARGARET	15	<input checked="" type="checkbox"/> Home <input checked="" type="checkbox"/> Phone <input checked="" type="checkbox"/> Email <input checked="" type="checkbox"/> Address	0	Select
<input checked="" type="checkbox"/>	Test	LILLIE	9	<input checked="" type="checkbox"/> Home <input checked="" type="checkbox"/> Phone <input checked="" type="checkbox"/> Email <input checked="" type="checkbox"/> Address	0	Select
<input checked="" type="checkbox"/>	Test	SHERYL	67	<input checked="" type="checkbox"/> Home <input checked="" type="checkbox"/> Phone <input checked="" type="checkbox"/> Email <input checked="" type="checkbox"/> Address	0	Select

Submit

2

Reports > Use Templates > See Patient Groups >

## Reminder/Recall

1 2 3

What do you want to do with your selected recall group?

Generate A Patient List

Generate Mail-Merge

Print Labels

3



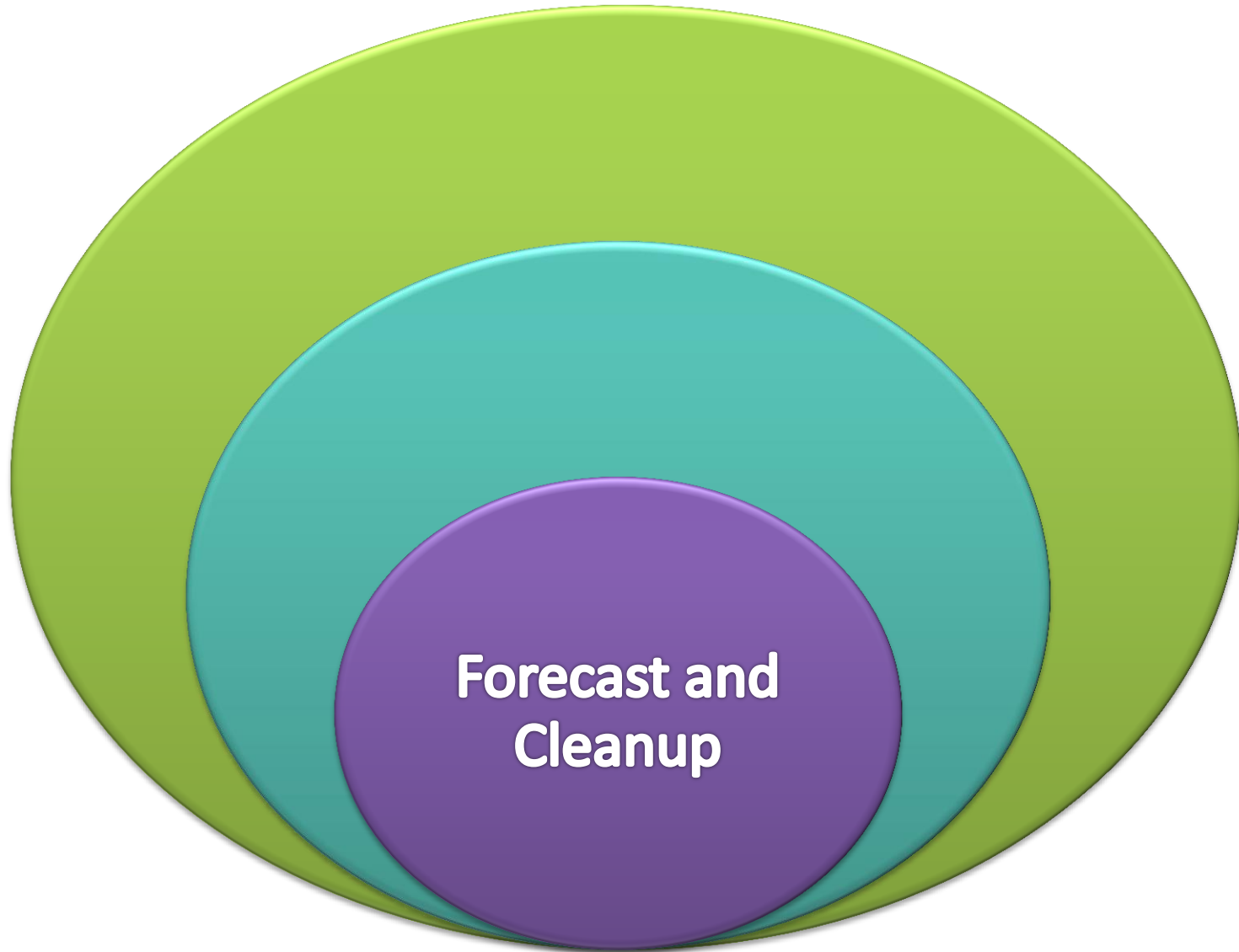
- Campaigns
  - » Flu
  - » HPV
  - » Outbreaks
- Prior to VFC/AFIX visits
  - » Boost rates before visit
- Soon-to-expire vaccines
- Identifying Patients who need to be updated
  - » Update demographic or vaccine info
  - » Inactivate

# Reminder/Recall Tips



- Choose lowest “Coverage Rate” percentage
- Choose one DOSE out of an antigen series
- Run (at least) once monthly
- Run for upcoming visits (due in 1 month, etc)

# Little Things Add Up...



► Main
► Favorites
► Patient
► Vaccinations
View/Add
Forecast
Summary
► Organization (IRMS)
► Facilities
► Lot Numbers
► Orders/Transfers
► Reports
► Settings
■ CASA Export
► Reminder/Recall
► Imports
► Exports
■ Job Queue
■ Change Password
■ Administration
■ Answers

Vaccination Forecast					
The forecast automatically switches to the accelerated schedule when a patient is behind schedule.					
Vaccine Family	Dose	Recommended Date	Minimum Valid Date	Overdue Date	Status
PNEUMO (PCV)	2	11/13/2012	11/13/2012	12/13/2012	Past Due
HEP-A	1	01/01/2013	01/01/2013	01/01/2014	Due Now
MMR	1	01/11/2013	01/11/2013	05/01/2013	Past Due
VARICELLA	1	01/11/2013	01/11/2013	05/01/2013	Past Due
HIB	3	05/16/2013	05/16/2013	06/15/2013	Past Due
DTaP/DT/Td	4	09/21/2013	09/21/2013	10/21/2013	Up to Date
FLU	3	10/01/2013	08/01/2013	10/31/2013	Up to Date
POLIO	5	01/01/2016	01/01/2016	01/01/2019	Up to Date
HPV	1	01/01/2023	01/01/2021	01/01/2025	Up to Date
MENINGOCOCCAL	1	01/01/2023	01/01/2023	01/01/2025	Up to Date

- Easy to read
- Runs off of the ACIP guidelines
- Takes into account patient age
- Updates instantly when vaccines are added
- Moves to accelerated schedule if needed

# Data Quality Detail



- Lists vaccines given outside ACIP recommended schedule and invalid doses

## Vaccination Data Quality Detail Report

June 09, 2014

This Vaccination Data Quality Detail Report is used to enable identification of the patient and vaccination records which were outside of the administration age or administered vaccinations that were given from unspecified vaccine types.

\*Denotes an orphaned vaccination record. This ID is the patient's Medical Record Number as was imported with this vaccination by the registry. There is no associated patient record in the registry and, therefore, no SIIS Patient Number has been generated.

Vaccination Date Range: 01/01/2013 through 05/01/2014

Organization (IRMS)	SIIS Patient	Patient Name	Patient DOB	Vaccine Group	Issue	Vacc Date
BESTEVERPEDS						
2350	27		08/22/1991	Hep B Ped/Adol - Preserv Free	Pediatric/Adolescent vaccine recorded as administered to adult >= 19 years of age.	02/16/2013
FOOT_PALACE						
1001	232		01/01/2013	DTaP	Minimum age for this dose not met.	08/07/2013
FACILITY_UNDEFINED						
1001	227		01/01/2012	Varicella	Live vaccines not administered on same date must be separated by 28 days.	01/10/2013
1001	234		01/01/2010	DTaP	Minimum age for this dose not met.	08/15/2013
1000	228		10/10/2010	Hib--unspecified	Administered vaccinations that were given from unspecified vaccine types	07/26/2013
1001	229		01/01/2008	DTaP	Minimum age for this dose not met.	07/15/2013
1000	148		01/01/2010	DTaP	Minimum age for this dose not met.	05/02/2013
2350	27		08/22/1991	DTaP/Hib	DTaP or Ped DT administered at >= 7 years of age.	04/01/2014
2350	27		08/22/1991	DTaP/Hib	Vaccine marked as Compromised.	04/01/2014

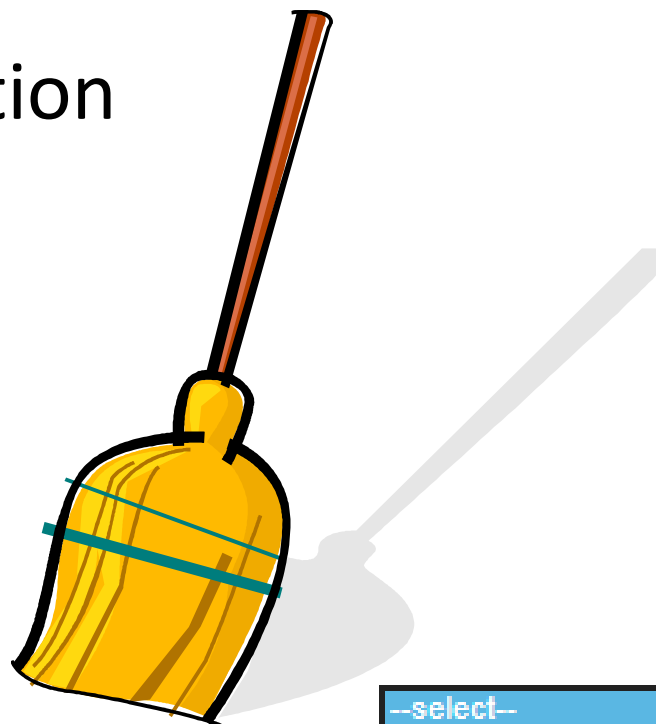
## ➤ Add missing information

- » Chickenpox history
- » Historical vaccines
- » Contraindications
- » Exceptions
- » Deferrals

## ➤ Update information

- » Contact Information

## ➤ Inactivate Patients



--select--
Address Incorrect
Changed to another provider
Deceased
Delivery Unsuccessful
Moved Out of State
Moved or Gone Elsewhere
No Postal Forward on File
Other
Postal Forward Order Expired

# Vaccination View/Add



▶ Main

▶ Message

▶ Favorites

▶ Patient

**▶ Vaccinations**

View/Add

Forecast

Summary

▶ Exec. Dashboard

▶ Organization (IRMS)

▶ Facilities

▶ Physicians & Vaccinators

▶ Lot Numbers

▶ Orders/Transfers

▶ Reports

▶ Settings

■ CASA Export

▶ Reminder/Recall

▶ Imports

▶ Exports

▶ HEDIS

■ Scheduled Reports

■ Job Queue

■ Change Password

■ Administration

▶ Campaigns

■ Serology

■ Answers

**Patient**

Name: TEST PATIENT A

Date of Birth: 01/01/2001

Guardian:

SIIS Patient ID: 345

Age: 14 yrs

Status: Active

**Vaccination View/Add**

( \* - Historicals , #- Adverse Reaction , I- Warning , +- Unverified Historicals , ^ - Compromised Vaccination )

Documented By: KEPNICKFACILITY

Double-click in any date field below to enter the default date: 04/06/2015

Vaccine	1	2	3	4	5	6
DTaP/Hep B/IPV	04/06/2015					
Varicella	04/06/2014 *					
DTaP						
Td (Adult)						
IPV						
Hib--unspecified						
Hep B/Hib						
Hep B Ped/Adol - Preserv Free						
Pneumococcal(PCV)						
Pneumococcal, PCV-13						
MMR	4/06/2015					
Hep A 2 dose - Ped/Adol						
Mening. (MCV4P)						
HPV, quadrivalent						
--select--						

Add Administered

Clear

Add Historicals

Contraindications

Deferrals

• If a combination vaccine is marked with a 'X', please verify which components of the vaccine are outside the ACIP schedule by viewing the Vaccination Summary .

iWeb

Version: 5.15.5.0

- Temperature Logs
- Order Tracking
- Lot Number Maintenance

# Record Temperature Logs



- ▶ Vaccinations
- ▶ Exec. Dashboard
- ▶ Organization (IRMS)
- ▶ Facilities
- ▶ Physicians & Vaccinators
- ▶ Lot Numbers
- ▶ Orders/Transfers
  - Alerts
  - Create/View Orders
  - Search History
  - Modify Order Set
  - Approve Orders
  - Approve Transfer
  - Approved Orders
  - Local Vaccine Allocations
  - Accountability
  - Submission
  - Vaccine Returns
  - Cold Storage
  - Provider Agreement
- ▶ Reports
- ▶ Settings
  - CASA Export
  - ▶ Reminder/Recall
  - ▶ Imports
  - ▶ Exports
  - ▶ HEDIS
  - Scheduled Reports
  - Job Queue
  - Change Password
  - Administration
  - ▶ Campaigns
  - Serology
  - Answers

## Enter Recorded Temperature

This record does not replace documentation attached to refrigerator.

Display inactive units ☐

Record Date From: 04/01/2015 Through: 04/06/2015

## Temperature Data

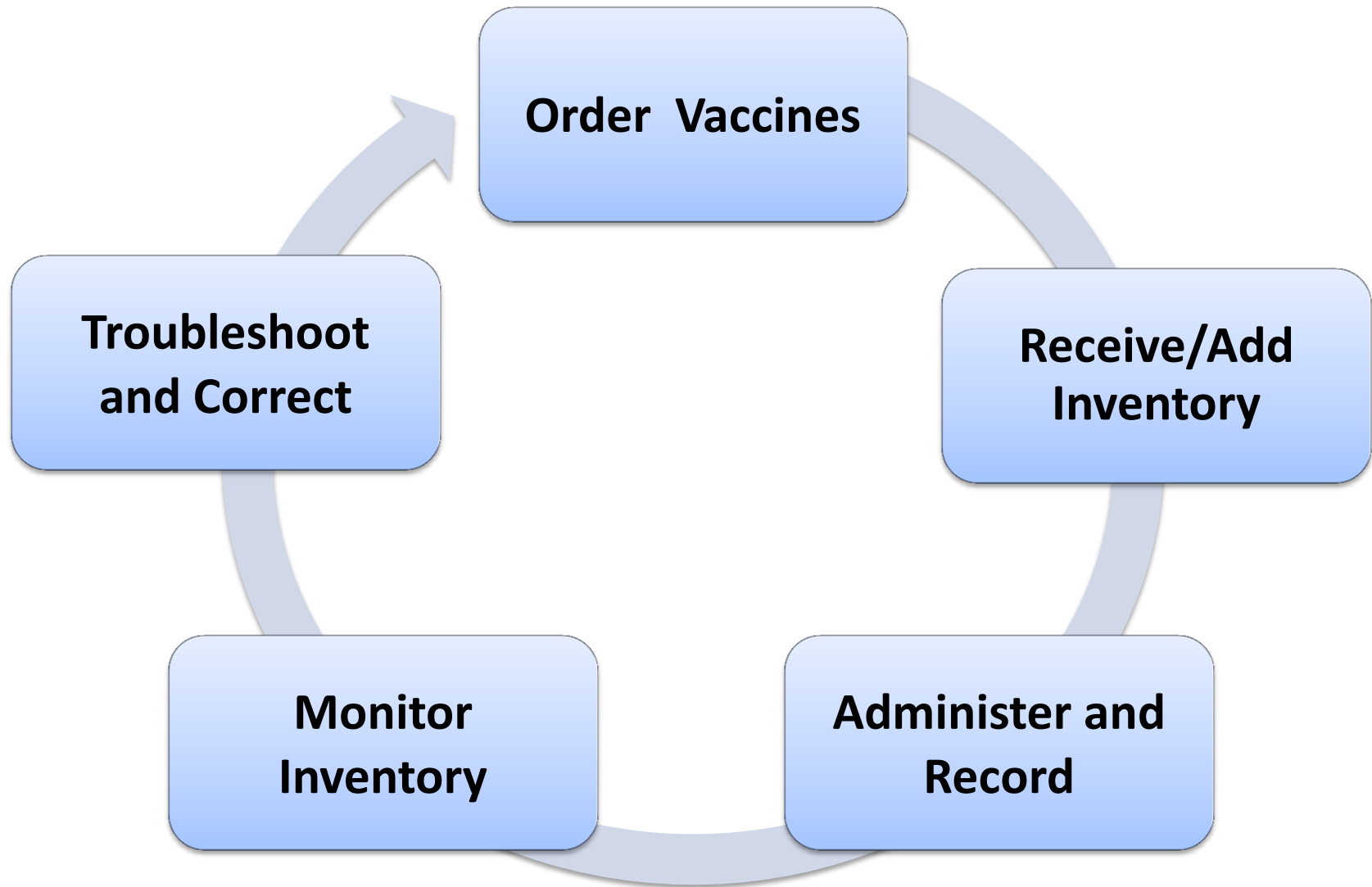
Day		Office Closed	Time	+/- UPSTAIRS FRIDGE ID # (°F)
04/06/2015	A.M.	<input type="checkbox"/>	8 AM	
	P.M.	<input type="checkbox"/>	5 PM	
04/05/2015	A.M.	<input type="checkbox"/>	8 AM	
	P.M.	<input type="checkbox"/>	5 PM	
04/04/2015	A.M.	<input type="checkbox"/>	8 AM	
	P.M.	<input type="checkbox"/>	5 PM	33.0
04/03/2015	A.M.	<input type="checkbox"/>	8 AM	56.0
	P.M.	<input type="checkbox"/>	5 PM	42.0
04/02/2015	A.M.	<input type="checkbox"/>	8 AM	44.0
	P.M.	<input type="checkbox"/>	5 PM	42.0
04/01/2015	A.M.	<input type="checkbox"/>	8 AM	45.0

Out of Range

Export

Save

# Inventory Management



# Track Inventory



**Current Order/Transfer List**

Inbound Orders

Select	Order Number	Approval Date	Status
<input type="radio"/>	12218		Approved
<input type="radio"/>	13917		In Manual Review
<input type="radio"/>	12677	0321 02/23/2015	In State Manual Review

**Receive in ASIIS when vaccine is delivered**

**Order Details**

Shipped Quantity	Receipt Quantity	Rejected Quantity	Vaccine	Manufacturer	Lot Number	Expiration Date	Reason for rejecting
20	20		MMR	MERCK-MSD	LOTS10	05/15/2015	--select--

Comments:

Tracking #:

Cancel Receive

## Reconcile Inventory

Vaccine	Lot Number	Exp Date	Quantity on Hand	Physical Inventory	Adjustment (+/-)	Category	Reason	Public	Inactive	Add Row
DTaP (Daptacel, Infanrix, Tripedia)	C4345AA	06/05/2015	0		0.0	--No Category Required--	--No Reason Required--	Y	<input type="checkbox"/>	+
Influ split 6-35 mos pres free (Fluzone PF, 25mL syringe)	U4794BA	06/30/2014	28		0.0	--No Category Required--	--No Reason Required--	Y	<input type="checkbox"/>	+
Influenza, live intranasal, quadrivalent (Flumist Quadrivalent)	BL2149	03/24/2014	16		0.0	--No Category Required--	--No Reason Required--	Y	<input type="checkbox"/>	+
MMR (MMRii)	J005728	05/13/2015	20		0.0	--No Category Required--	--No Reason Required--	Y	<input type="checkbox"/>	+
MMR/Varicella (ProQuad)	J000139	07/04/2014	11		0.0	--No Category Required--	--No Reason Required--	Y	<input type="checkbox"/>	+
Mening (MCV4P) (Menactra)	U4414AA	04/18/2014	9		0.0	--No Category Required--	--No Reason Required--	Y	<input type="checkbox"/>	+
Mening (MCV4P) (Menactra)	U4446AC	08/15/2014	6		0.0	--No Category Required--	--No Reason Required--	Y	<input type="checkbox"/>	+
Pneumococcal, PCV-13 (Prenar13)	H01428	02/28/2015	16		0.0	--No Category Required--	--No Reason Required--	Y	<input type="checkbox"/>	+
Rotavirus, pentavalent RV5 (RotaTeq)	J008735	03/24/2015	10		0.0	--No Category Required--	--No Reason Required--	Y	<input type="checkbox"/>	+
Tdap (Boostrix, Adacel)	33AG5	09/18/2015	10		0.0	--No Category Required--	--No Reason Required--	Y	<input type="checkbox"/>	+
Tdap (Boostrix, Adacel)	AC52B090AA	06/21/2014	4		0.0	--No Category Required--	--No Reason Required--	Y	<input type="checkbox"/>	+
Varicella (Varivax)	H007274	03/23/2014	17		0.0	--No Category Required--	--No Reason Required--	Y	<input type="checkbox"/>	+

Inventory Last Submitted: N/A

### Legend

<span style="background-color: #cccccc; border: 1px solid black; display: inline-block; width: 10px; height: 10px;"></span>	Public Lots
<span style="background-color: #e0e0e0; border: 1px solid black; display: inline-block; width: 10px; height: 10px;"></span>	Private Lots
<span style="background-color: #ffcccc; border: 1px solid black; display: inline-block; width: 10px; height: 10px;"></span>	Expired Vaccines
<span style="background-color: #ffffcc; border: 1px solid black; display: inline-block; width: 10px; height: 10px;"></span>	Expires in 30 days or less

Print Reset Save  
Submit Monthly Inventory

- REPORTS
- QUALITY IMPROVEMENT
- DECISION TOOLS

## Vaccination View/Add

(\* - Historicals, # - Adverse Reaction, ! - Warning, ! - Warning, ! - Warning, ^ - Compromised Vaccine)  
Documented By: DOWNTOWN

Double-click in any date field below to enter the default date: 03/28/2014

Vaccine	1	2	3
DTaP (Daptacel, Infanrix, Tripedia)	07/27/2010		
MMR (MMRii)	07/27/2010		
Novel H1N1, Nasal	09/09/2009 *		
DTaP/Hep B/HPV (Pediarix)			
DTaP/Hib/HPV (Pentacel)			
Influ split 36+ mos pres free (Fluzone PF)			
Influenza inj quadrivalent pres free 36+ mos (Fluarix PF (IV4))			
Influenza, live intranasal, quadrivalent (Flumist Quadrivalent)			
Tdap (Boostrix, Adacel)			
Varicella (Varivax)			
--select--			

Add Administered

Clear

\* If a combination vaccine is marked with a 'X', please verify which components of the vaccine are out Summary.

Contraindications

Add Chickenpox History

# Track Inventory



- Inactivate Lots
- View Expired or Soon-to-Expire Lots
- Track Received/Wasted/Transferred Doses
- Adjust Used Doses

Reconcile Inventory										
Vaccine	Lot Number	Exp Date	Quantity on Hand	Physical Inventory	Adjustment (+/-)	Category	Reason	Public	Inactive	Add Row
DTaP/Hep B/IPV	1234	01/01/2017	2	1	-1.0	Wasted	--select--	Y	<input type="checkbox"/>	+
Influenza, H51N-1203	123	08/19/2017	15		0.0	--No Category Required	--select--	Y	<input type="checkbox"/>	+

Broken/Dropped/Spilled  
Drawn up, not used  
Lost and Unaccounted  
Vaccine Damaged in Transit

Reset Save

Submit Monthly Inventory

**Inventory Last Submitted:** 01/15/2015

Legend	
<div></div>	Public Lots
<div></div>	Private Lots
<div></div>	Expired Vaccines
<div></div>	Expires in 30 days or less

Record Doses Immediately!

ASIIS Today Can Help:

- Boost Public Health
- Boost Business
- Ensure Compliance
- Improve Patient Care
- Save Time and Resources



iWeb

# ***"ASIS Tomorrow"***



# 2029



INTERACTION



ACCESS



SELF-MONITORING



INTELLIGENCE

# Resources for help



## ASIIS (Arizona State Immunization Information System)

<https://asiis.azdhs.gov/>

Monday-Friday 8:00-5:00 PM

Hotline: (602) 364-3899 or 1-877-491-5741 (toll-free)

Fax: (602) 364-3285

Email: [ASIISHelpDesk@azdhs.gov](mailto:ASIISHelpDesk@azdhs.gov) Email: [ASIISrequest@azdhs.gov](mailto:ASIISrequest@azdhs.gov)



<p>Arizona Immunization Program Office</p> <p><a href="http://www.azdhs.gov/phs/immun/index.htm">http://www.azdhs.gov/phs/immun/index.htm</a></p> <p>Phone: (602) 364-3630</p> <p>Fax: (602) 364-3285</p>	<p>Vaccines for Children (VFC) Program</p> <p><a href="http://azdhs.gov/phs/immunization/vaccines-for-children/index.php">http://azdhs.gov/phs/immunization/vaccines-for-children/index.php</a></p> <p>Phone: (602) 364-3642</p> <p>Fax: (602) 364-3276</p>	<p>TAPI (The Arizona Partnership for Immunization)</p> <p><a href="http://www.whylimmunize.org">http://www.whylimmunize.org</a></p> <p>Phone: (602) 253-0090</p> <p>Fax: (602) 262-2654</p>	
<p>Centers for Disease Control and Prevention</p> <p><a href="http://www.cdc.gov/vaccines/programs/iis/contacts-registry-staff.html">http://www.cdc.gov/vaccines/programs/iis/contacts-registry-staff.html</a></p> <p>Phone: (800)-232-4636 or (888) 232-6348</p>	<p>Vaccine Information – Immunization Action Coalition</p> <p><a href="http://www.vaccineinformation.org/">http://www.vaccineinformation.org/</a></p> <p>(651) 647-9009</p> <p>Fax: (651) 647-9131</p>	<p>Community Information and Referral Services</p> <p><a href="http://www.cir.org/">http://www.cir.org/</a></p> <p>1-877-211-8661</p> <p>Fax: (602) 263-0979</p>	<p>Maricopa County Childhood Immunization Partnership (MCCHIP)</p> <p><a href="http://www.mcchip.org">http://www.mcchip.org</a></p> <p>(602) 2MC-CHIP</p>